

GMC IMMEDIATE ACTION EXPECTATION REPORTING

July Report – up to date as of 7-16-2012

Table 1: Monthly Beneficiary Letter Summary

GMC Plan	Access	Health Net	Liberty	Western
Total calls received referencing letter/flyer	No reporting information currently available. Mailing of Plan Brochure went out to beneficiaries.			
Appointments Set				
Other Information Given/Questions Answered				
Grievances/Complaints Received				
Total number of undeliverable mail				
Total number mailed	25,147	45,763*		56,913

LEGEND:

**includes Health Net & LIBERTY total*

NOTES:

Access - Mailing of Plan Brochure completed 6-28-2012

Health Net - Mailing of Plan Brochure 7-6-2012

LIBERTY - Mailing of Plan Brochure 7-6-2012

Western - Mailing of Plan Brochure 6-22-2012

July data is due to DHCS 8-5-12.

Updated with 7-5-12 plan data submissions.

JP Updated as of 7-9-2012

Table 2: Monthly Outbound Call Campaign

<u>GMC PLAN</u>	<u># of Calls Made</u>	<u>Wrong # and/or Phone # Out of Service</u>	<u>*** No Phone # Listed</u>	<u>Appt Scheduled</u>	<u>Left Msg</u>	<u>Member Declined</u>	<u>Member Hung Up</u>	<u>No Answer</u>	<u># of Appt. kept from Scheduled</u>	<u># of Appts. Missed from Scheduled</u>
Access	15,496	2,481 16.01%	Did not track.	1,596 10.30%	3,987 25.73%	723 4.67%	2,883 18.60%	605 3.90%	722	323
*LIBERTY	13,304	2,000 15.03%	Did not track.	1,037 7.79%	6,100 45.85%	1,332 10.01%	2,835 21.31%		n/a	n/a
*Health Net	14,833	2,203 14.85%	Did not track.	1,568 10.57%	6,929 46.71%	1,265 8.53%	2,687 18.12%		n/a	n/a
**Western	6,090	Did not track.		136 2.23%	1,810 29.72%	Did not track.			n/a	n/a

LEGEND:

* LIBERTY and Health Net Dental have completed all ages in their campaign. Member Declined and Member Hung Up were not tracked separately.

**Western completed all calls prior to the Immediate Action Request reporting and did not track some of the required information.

*** "No Phone # Listed" was added after plans had already began their call campaigns. This will be tracked on a go forward basis, sections are marked with "did not track" due to calls being made prior to additional direction from DHCS.

If a section is marked n/a it means the plans either were not responsible to submit this information at all or at this time.

NOTES:

•Community Dental has been removed from tracking as they are no longer a GMC plan. These members will be called by LIBERTY regardless if they were called by CDS. Call campaign will be completed for CDS by 8-3-12.

•All calls made were to beneficiaries who had not had an appointment within the last 12 months.

•All Plans are going to continue with a call campaign except Access (Access will follow up with offices on a monthly basis).

BEST PRACTICES:

•The Customer Service Representative (CSR) was able to provide focused/ one-on-one assistance for members who had concerns and needed appointments.

•CSRs were able to educate the members with small children regarding 1st birthday/1st tooth and the importance of the dental home.

•Bilingual representatives to make the calls.

•Making calls during the day, rather than after hours, was helpful when conducting 3-way calls to schedule appointments with dental offices.

•Developing scripts for the CSRs to follow when introducing the subject to the member.

•Following up with members, who were initially unavailable, helped to increase utilization.

July data is due to DHCS 8-5-12.

JP Updated as of 7-6-12

Updated with 7-5-12 plan data submissions.

Table 3: Monthly Provider Utilization

<u>GMC Plan</u>		Access	Health Net	LIBERTY	Western	Monthly Total
January	# Eligible	33,446	17,982	18,852	57,561	127,841
	Encounters	2,367	856	941	4,000	8,164
	Utilization %	7.1%	4.8%	5.0%	6.9%	6.4%
February	# Eligible	30,983	18,325	17,987	57,443	124,738
	Encounters	1,797	698	886	3,518	6,899
	Utilization %	5.8%	3.8%	4.9%	6.1%	5.5%
March	# Eligible	28,915	18,303	16,799	56,701	120,718
	Encounters	1,781	803	875	3,871	7,330
	Utilization %	6.2%	4.4%	5.2%	6.8%	6.1%
April	# Eligible	27,425	18,085	17,798	54,424	117,732
	Encounters	1,675	803	1,110	2,607	6,195
	Utilization %	6.1%	4.4%	6.2%	4.8%	5.3%
May	# Eligible	26,287	15,672	14,400	57,121	113,480
	Encounters	1,448	697	836	2,166	5,147
	Utilization %	5.5%	4.4%	5.8%	3.8%	19.6%

NOTES:

- # Eligible is based on the eligible members (ages 0 to 21) beginning in January 2012. For each subsequent month in the measurement period, the "# Eligible" is adjusted to subtract the members that have been treated in prior month(s) and to add newly enrolled members.
- Encounters is the count of unduplicated members treated. This is unduplicated members YTD. The members that have been seen in previous month(s) are not included in the count.
- Utilization % = Encounters/ # Eligible within each month.

June data is due to DHCS 8-20-12

JP updated as of 7-24-12

All data is for children ages 0 to under 21.

Updated with 7-20-12 plan data submissions.

Table 4: June 2012 Provider Education Seminars

<u>GMC Plan</u>	<u># Of Providers Educated</u>	<u>Provider Concerns</u>	<u>Educational materials and education strategy</u>
Access	17	0	Appointment accessibility, wait time in office and operatory, and benefit review. Call campaign and member follow up. Referral Process.
LIBERTY*	0	0	n/a
Health Net*	0	0	n/a
Western	10	0	Physical site visits, conferences and telephone calls.

LEGEND:

n/a - did not capture information during reported period

**Concentrating on PHP in June*

July data is due to DHCS 8-5-12

JP updated as of 7-11-12

Updated with 7-5-12 plan data submissions.

Table 5: Monthly FQHC

<u>FQHC</u>	<u>Access</u>	<u>Health Net</u>	<u>Liberty</u>	<u>Western</u>
The Effort-Oak Park	Contracted	Contracted	Contracted	Contracted
The Effort-North Highlands	Pending	Contracted	Contracted	Contracted
The Effort - South Valley**	Not contracted	Not contracted	Not contracted	Reached out, onsite visit 7-23-2012
Sacramento Community Clinic	Contracted	Contracted	Contracted	Contracted*
Native American Health Clinic	Onsite visit 6-6-2012, asked to leave info.	Not contracted	Not contracted	Reached out, does not contract with HMO's

LEGEND:

** Sacramento Community Clinic shows as Health & Life Organization*

***South Valley opening end of summer 2012*

NOTES:

Health & Life Organization and The Effort-Marysville does not provide dental services (Access reached out)

July data is due to DHCS 8-5-12.

JP updated as of 7-9-2012

Updated with 7-5-12 plan data submissions.

Table 6: Increase Provider and Specialist Enrollment

GMC	Access	Health Net	LIBERTY	Western	
General Providers					
January	n/a	3	2	n/a	
February	n/a	0	0	n/a	
March	n/a	0	0	n/a	
April	2	3	3	1	
May	3	6	0	3	
June	11	0	0	0	
YTD TOTAL	16	12	5	4	37
Specialist					
January	n/a	1	1	n/a	
February	n/a	12	12	n/a	
March	n/a	1	1	n/a	
April	1	5	5	0	
May	3	0	0	0	
June	13	0	0	0	
YTD TOTAL	17	19	19	0	55

July data is due to DHCS 8-5-2012.

JP updated as of 7-6-2012

Updated with 7-5-12 plan data submissions.

Table 7: May 2012 Timely Access

GMC Plan		Access	Health Net	LIBERTY	Western
May 2012 Member Enrollee Count Total		51,622	32,651	27,465	90,130
May 2012 Member Enrollee Count (under 21)		33,599	19,440	17,916	57,639
May 2012 Member Enrollee Count (21+)		18,023	13,211	9,549	32,491
Average (days) to schedule	Initial Appointment	6	11	13	6
	Routine Appointment	7	11	13	6
	Preventative	8	11	10	6
	Emergency Visit	1	1	1	1
# of No Show Appointments		1,446	n/a	n/a	23,701
# of Rescheduled Appointments		229	n/a	n/a	460
Are interpreter Services Available		Yes	Yes	Yes	Yes
Answering Services Available		Yes	Yes	Yes	Yes
Avg. Ratio of Members to Primary Care Dentist		1/1,081	1/438	1/210	1/1,236
Members who are assigned to a Primary Care Dentist who is more than 30 minutes or more than 10 miles from their residence.	Average number of members	371	199	198	775
	# of members to 1000 enrollees ratio	7.1/1,000	6.0/1,000	7.2/1,000	8.6/1,000
Routine Authorizations	Approved within 5 business days	32	249	222	106
	Approved within 10 business days	32	250	223	109
	Approved outside of 10 business days	0	1	0	2
Claims	% Paid within 90 days	99.97%	100%	100%	100%
	% Paid outside of 90 days	0.03%	0%	0%	0%
Specialist Referrals for the Month (under 21)	Received	54	243	248	211
	Denied	16	23	29	13
		29.6%	9.5%	11.7%	6.2%
	Denied (clinical)	0	Information Requested.		
	Denied (administration)	16			
	Approved	38	220	219	196
		70.4%	90.5%	88.3%	92.9%
	Completed	12	127	96	209
	Expired	14	65	42	n/a

LEGEND:

n/a means the plan did not capture this information during the reporting period

NOTES:

of members per 1000 enrollees ratio - (average # of members >30 minutes or >10 miles/ average # of member enrollee count total) x 1000

Specialist Referrals % - # (denied, approved, completed, expired) / # received

Specialist Referrals expire after 90 days from date of issue with the exception of Western (45 days). There are always exceptions for extensions.

June data is due to DHCS 8-5-12

JP Updated as of 7-24-12